Application or Docket Number									
SMALL ENTITY OTHER THAN TYPE OR SMALL ENTITY									
RATE	Ξ	FEE		RATE	FEE				
BASIC F	EE	375.00	OR	BASIC FEE	750.00				
X\$ 9	=		OR	X\$18=					
X42≃			OR	X84=					
+140=			OR	+280=					
TOTAL			OR	TOTAL	700.				
OTHER THAN SMALL ENTITY OR SMALL ENTITY									
RATE	=	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE				
X\$ 9:	=		OR	X\$18=					
X42=		1	OR	X84=					
+140=			OR	+280≃					
TOTAL ADDIT. FEE			OR ADDIT. FEE						
RATE	Ξ	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE				
X\$ 9=	=		OR	X\$18=					
X42=			OR	X84=					
+140=			OR	+280=					
TOT ADDIT, FI			OR	TOTAL ADDIT. FEE					
RATE		ADDI- TIONAL FEE	÷	RATE	ADDI- TIONAL FEE				
X\$ 9=	-		OR	X\$18=					
X42=			OR	X84=					

PATENT APPLICATION FEE DETERMINATION RECORD

Effective January 1, 2003							10615724					
CLAIMS AS FILED - PART I (Column 1) (Column 2)							SMALL ENTITY TYPE		OR	OTHER THAN		
TOTAL CLAIMS		3				RAT	E	FEE		RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA		BASIC	FEE	375.00	OR	BASIC FEE	750.00
TOTAL CHARGEABLE CLAIMS			3 - minus 20=		*6		X\$ 9	=		OR	X\$18=	
INDEPENDENT CLAIMS			/_ minus 3 = 0		8		X42:	=		OR	X84=	
MULTIPLE DEPENDENT CLAIM PRESENT						+140	=		OR	+280=		
* If the difference in column 1 is less than zero, enter "0" in column 2						TOTA			OR	TOTAL	700	
CLAIMS AS AMENDED - PART II										10,,	OTHER	THAN
					(Column 3)	SMAI	LL E	ENTITY	OR	SMALL	ENTITY	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUMI PREVIO PAID	BER DUSLY	PRESENT EXTRA	RATI		ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NDM	Total	*	Minus	**		= .	X\$ 9	=		OR	X\$18=	
AME	Independent	*	Minus	***	- OL A184	=	X42:			OR	X84=	
<u> </u>	FIRST PRESE	NTATION OF M	JETIPLE DEI	PENDENI	CLAIM		+140	=		OR	+280=	
								ΓAL			TOTAL	
		(Column 1)		(Colur	nn 2)	(Column 3)	ADDIT. F	EE			ADDIT. FEE	
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	EST BER DUSLY	PRESENT EXTRA	RATE	Ξ	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
N	Total	*	Minus	**		=	X\$ 9	=		OR	X\$18=	
AME	Independent	*	Minus	***	CLAIM	<u> -</u>	X42=	=	*-	OR	X84=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+140			OR	+280=	
							TOT ADDIT. F	EE		OR	TOTAL ADDIT. FEE	
		(Column 1) CLAIMS		(Colur		(Column 3)						
AMENDMENT C		REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA	RATE	Ξ	ADDI- TIONAL FEE	÷	RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	X\$ 9:	=		OR	X\$18=	
	Independent	*	Minus	***		=	X42=			OR	X84=	
L	FIRST PRESE	NTATION OF M	ULTIPLE DE	PENDENT	CLAIM			\dashv				
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.										OR	+280=	-
***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												

FORM PTO-875 (Rev. 12/02)